

**FORM RS - 1**

North Dakota Department of Transportation  
Motor Vehicle Division/Motor Carrier Section  
SFN 19426 (05-2002)

MOTOR VEHICLE DIVISION/SSRS  
ND DEPARTMENT OF TRANSPORTATION  
608 E BOULEVARD AVE  
BISMARCK ND 58505-0780  
Phone: (701) 328-2725  
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**Year** \_\_\_\_\_

**UNIFORM APPLICATION FOR SINGLE STATE REGISTRATION FOR MOTOR CARRIERS  
OPERATING UNDER AUTHORITY ISSUED BY THE FEDERAL HIGHWAY ADMINISTRATION**

**MOTOR CARRIER IDENTIFICATION NUMBERS:**

FHWA IVIC No(s).
US DOT No.
FEIN No.

**APPLICANT: (identical to the name on FHWA order)**

Name
D/B/A
Telephone Number
Fax Number

**PRINCIPLE PLACE OF BUSINESS ADDRESS:** A principal place of business is a single location that serves as a motor carrier's headquarters and where it maintains or can make available its operational records.

Street		
City	State	Zip Code

**MAILING ADDRESS: (if different from business address above)**

Street		
City	State	Zip Code

**TYPE OF REGISTRATION: (Check only one box)**

- ☐ New Carrier Registration - The motor carrier has not previously registered.  
☐ Annual Registration - The motor carrier is renewing its annual registration.  
☐ New Registration State Selection - The motor carrier has changed its principle program.  
The prior registration state was \_\_\_\_\_

**TYPE OF MOTOR CARRIER: (Check only one box)**

- ☐ Individual      ☐ Partnership      ☐ Corporation

If corporation, give state in which incorporated: \_\_\_\_\_

**List name of partners or officers:**

Name	Title
Name	Title
Name	Title

**TYPE OF FHWA REGISTERED AUTHORITY: (Check only one box)**

- ☐ Permanent Certificate or Permit  
☐ Temporary Authority (TA)  
☐ Emergency Temporary Authority (ETA) - Expiration Date: \_\_\_\_\_

**TYPE OF MOTOR CARRIER OPERATION: (Check only one box)**

- ☐ Transporter of Property - Using freight vehicles with a gross vehicle weight rating 10,000 pounds or more.
- ☐ Transporter of Property - Using **only** freight vehicles with a gross vehicle weight rating of less than 10,000 pounds.
- ☐ Transporter of Passengers - Using vehicles with a seating capacity of 16 passengers or more.
- ☐ Transporter of Passengers - Using **only** vehicles with a seating capacity of 15 passengers or less.

**FHWA CERTIFICATE(S) OR PERMIT(S): (Check only one box)**

- ☐ FHWA Authority Order(s) attached for first year registration.
- ☐ FHWA Authority Order(s) attached for additional authority received.
- ☐ No Changes from prior year registration.

**PROOF OF PUBLIC LIABILITY SECURITY: (Check only one box)**

- ☐ The applicant or its insurance company **will file** a copy of its proof of public liability security to the registration state.
- ☐ The applicant or its insurance company **has filed** a copy of its proof of public liability security to the registration state and the insurance coverage as stated on the form remains in effect.
- ☐ The applicant has an approved self-insurance plan or other security in full force and effect and the carrier is in full compliance with the conditions imposed by the FHWA order. A copy of the FHWA order is attached or has been previously filed with the registration state.

**HAZARDOUS MATERIALS: (Check only one box)**

- ☐ The applicant **will NOT haul** hazardous materials in any quantity.
- ☐ The applicant **will haul** hazardous materials requiring **\$1 million in** Public Liability and Property Damage Insurance in accordance with Title 49 CFR § 1043.2.
- ☐ The applicant **will haul** hazardous materials requiring **\$5 million in** Public Liability and Property Damage Insurance in accordance with Title 49 CFR § 1043.2.

**PROCESS AGENT: (Check only one box)**

- ☐ FHWA Form No. BOC-3 or blanket designation attached for new registration.
- ☐ FHWA Form No. BOC-3 or blanket designation attached reflecting changes or designation of process agent.
- ☐ No change from prior year registration.

**CERTIFICATION:**

I, the undersigned, under penalty for false statement, certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the applicant. (Penalty provisions subject to the laws of the registration state.)

Name (Printed)	Date
Signature	Title